

POLIOMYELITIS IN VERMONT

Principal Theme for Discussion at Health Officers' School.

Prevention and Treatment of Smallpox, Diphtheria and Typhoid Fever Also on the Program of Important Day.

The largest part of Thursday's program at the annual health officers' school of instruction was given over to the study of poliomyelitis in Vermont as well as the study of the history of the disease. Addresses were given by authorities on the subject at the afternoon and evening sessions. The morning session was devoted to papers read by prominent physicians of the State on the diagnosis and control of disease, followed by a discussion and demonstrations at the laboratory of hygiene.

SMALLPOX. Thursday morning's session was opened with a symposium on the diagnosis and control of disease. Dr. H. A. Lord of this city read a paper on the diagnosis and control of smallpox. In part he said:

For the reason that we have been having a mild and modified form of smallpox in different parts of Vermont and the seeming indifference to its gravity by many it seems advisable to call attention to its importance. Because it is mild today it is not to be taken lightly. It is a disease which may be mild for a time and then suddenly change to a most malignant and fatal type. The terms "control of smallpox" and "eradication for smallpox" are synonymous.

Everyone should have a general knowledge of the symptoms of smallpox, for a person in a family camp or the head of a family may have a spread of the disease in a very short time. The symptoms, which are a rule very much like those of the grippe to begin with. The disease seldom fails to be ushered in with fever, chills, sore throat, headache and in some cases, vomiting. Usually, about the end of the third day the eruptions appear, the temperature falls and the patient feels much better if the disease is light and suffers little thereafter. The eruption is all in the same stage, first appearing on the face and hands, while in chickenpox, which is most likely to be confused with smallpox, the eruption appears in spots. The eruption may be distributed over the body, though it is much more pronounced on the extremities in smallpox, while in chickenpox the eruption is almost invariably upon the trunk rather than upon the exposed surface. The mild type of smallpox, the physician should know, it being regarded as chickenpox until a more serious case appears in the same family or community. The disease is not a disease of "chickenpox" but there is no disease of that name in the literature of medicine.

Smallpox is the easiest of all diseases to control if promptly recognized and treated, and is the only disease absolutely under control by vaccination. Any person or community that suffers from smallpox in the light of today is guilty of ignorance, carelessness or prejudice.

Upon the first appearance of the disease in a locality, vaccination should be resorted to at once, and it is not prudent to rely upon an old vaccination. No one has the right to go unprotected from that which can so easily be guarded against, and it would be economic for every town to assume the cost.

DIPHTHERIA. Dr. M. B. Stanley of White River Junction in his paper on diphtheria said in part:

Precious to the discovery and perfection of antitoxin, diphtheria was one of the most dreaded, most fatal and most common maladies of childhood. Direct infection is the cause in a great majority of cases, the bacilli being discharged in saliva and mucus from the nose and throat. The bacilli are very persistent and may be preserved for months in dry mucus or on a child's toy after the same length of time. Because of this fact, indirect infection is possible from accidentally contaminated toys, clothing, etc. The general weakness and apathy later in the course of the disease being localized and a very characteristic symptom at the beginning is excruciating pain and tenderness in the muscles affected. In cases of infantile paralysis there is a great difference between an ideal quarantine and the quarantine which is a large number of cases we are obliged to institute. It is just and right that the broad winner be allowed to work if it can be done without disregarding the rights of a community. In very many cases this can only be done safely by his finding a place to board and room outside of the house, which house of course is under a hardship if the disease appears in school it can probably be controlled as well by allowing school to continue and taking cultures from the throats of all of the children, isolating those who are found to be carriers. Observation is better than wholesale immunization.

TYPHOID FEVER. Dr. Charles S. Caverly of Rutland, president of the State board of health, read a paper treating with the modes of dissemination and prophylaxis of typhoid fever. A brief extract follows:

Typhoid fever is a germ disease given off the human body. Its chief source in the stools and urine. It can only cause the disease by getting into the intestinal canal of a non-immune person via the mouth. Wholesale epidemics have usually been water-borne, the relative location of the privy and well on the farm often being suited to the transmission of infective matter from the first to the latter. Artificial ice made from pure distilled water is above reproach but frozen water may convey the germ although there is little danger from ice that has been frozen at least three months. The improvement of Vermont water supplies has been without doubt the chief factor in the steady reduction of this disease in our State.

While the germ is fragile and quickly perishes in the elements, it may live and even grow in milk, and milk products, cream, butter and cheese, may give rise to the disease in rare instances. Milk may be infected by the handlers who have been infected by the animals in infected water and by dilution with infected water.

The germ may also be taken into the system with cold food eaten raw. Oyster epidemics are frequently described, the practice of fattening oysters in fresh water giving rise to infected oysters when the character of the fresh water is not carefully guarded. Shell fish and articles of vegetable nature eaten raw may sometimes cause the disease. The carriage of typhoid organisms is now understood so that the room where typhoid exists should be screened. Four per cent. of all typhoid cases become permanent carriers and no case should be released until it has been determined whether or not the case is to remain a

permanent carrier and if found to be such he should be instructed of the liability he runs of giving the disease to others. Those who attend typhoid patients should be exceedingly careful as this disease is as often infectious as diphtheria, scarlet fever or smallpox. Typhoid vaccines are now generally used. This procedure has been the means of eliminating typhoid fever from the armies of the world. Vermont is interested in the vaccination business, as we wish to cultivate it. Typhoid prevention is a matter of material, pecuniary concern to us.

Following the meeting at the high school the State laboratory of hygiene on Church street was a busy place. The health officers visited there to attend demonstrations of the work carried on. Dinner was served to the visiting physicians from 12 to 2 at the Hotel Vermont.

INFANTILE PARALYSIS. The afternoon session was given over to infantile paralysis, a topic of especial interest to Vermont health officers at this time. There were two addresses during the afternoon.

Dr. James H. Russell of the Rockefeller Institute at New York discussing the etiology and pathology of the disease. "The Diagnosis, Treatment and Prevention of Infantile Paralysis" was the subject of an address delivered by Dr. Francis R. Fraser of the department of medicine of the Presbyterian hospital at New York. Dr. Russell in his address gave much technical information of especial interest to physicians. He told of the history of the disease, which is by no means a new one, but one which has been recognized for some time. The best contributions to the solving of the problem have been contributed during an epidemic of the disease or soon after one. Studies have proven that the acute stage of poliomyelitis is the important one and not the paralytic stage, as heretofore has been supposed. The disease seems to be one of contagion, and so-called abortive cases, where the patient may not be ill enough to be confined, or if confined, may not be paralyzed, are just as dangerous as to spreading the disease as those where complete paralysis is found. The only animal which has been so far discovered which will carry the disease is the monkey, and this is a prominent point in the history of the disease, for if dogs, cats, horses or other animals were able to carry the disease it would be much more difficult to control. The disease germ has been discovered and is so tiny that it may pass through unfiltered porcelain. It is easily killed by heat but will resist freezing and not all antiseptics will kill it. Study is now being made as to how the disease is transferred from human to human, the germ being found on the nasal mucus and after once placed in the air it is too fast to stop its progress. Dr. Fraser, with the aid of a stereopticon, showed a number of clinical pictures, explaining laboratory tests used in the study of the disease.

Dr. Fraser, in simple language, explained the progress of the disease. A very large part of his interesting address followed.

Several epidemics of infantile paralysis occur in small areas and the following year cases appear perhaps not in the same location but where there have not been many cases the year before. This would lead to the belief that the bad area the first year had become exhausted and so the Vermont State board decided measures of precaution must be taken. In order to take proper precaution, the cause must be found. The term infantile paralysis is far from true as of actual records kept in Vermont it is shown that there were 57 cases among children from one to two years of age, 58 from two to five, 55 from five to ten, 64 from 10 to 20 and only 27 cases where the patient was over 20 years of age. It affects children of any racial condition and it is more frequently found descending upon one in a healthy condition than upon a sickly person. Records show that 170 cases fell on persons in excellent health, 97 were in good health and only 18 reported having poor health.

Symptoms of the disease are a heavy, drowsy condition, but not coma. The child is restless, cranky and wants to be left alone. There is a fever, but it is not high enough. There may be an occasional twitch of an arm, leg or part of the face and the patient may perspire profusely. The general weakness and apathy later in the course of the disease being localized and a very characteristic symptom at the beginning is excruciating pain and tenderness in the muscles affected. In cases of infantile paralysis there is a great difference between an ideal quarantine and the quarantine which is a large number of cases we are obliged to institute. It is just and right that the broad winner be allowed to work if it can be done without disregarding the rights of a community. In very many cases this can only be done safely by his finding a place to board and room outside of the house, which house of course is under a hardship if the disease appears in school it can probably be controlled as well by allowing school to continue and taking cultures from the throats of all of the children, isolating those who are found to be carriers. Observation is better than wholesale immunization.

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SCARLET FEVER. The morning session was opened by the reading of a paper by Dr. F. D. Fairly of Huntington, treating with the diagnosis and control of scarlet fever. He said in part:

I wish to mention some recent additions to our knowledge of some of the acute infections, notably scarlet fever. In 1911 Bowdard produced scarlet fever in monkeys by using as a source of infection scrapings from the tongue of a scarlet fever patient, also transmitting it from monkey to monkey, but denied the specific relation of the streptococcus and claimed that the infective agency of scarlet fever should be classed among the filterable viruses. In Vermont scarlet fever ranks low in our morbidity and mortality reports. It is communicated by direct contact of the healthy with the infected and by intermediation of various substances, to which the infective material adheres. The susceptibility to scarlet fever is very variable, the shortest time being given as one day and from that 12 or 14 days. The disease may be carried on or about the persons of the healthy to others at a great distance, or it may be carried in foods or drinks, as evidenced by epidemics following in the wake of a milk distributor. It is a children's disease, but is also found in older people. I confidently express the hope that the time may not be far distant when isolation of the specific organisms may clear up much of the disease. A person having a rash reasonably supposed to be scarlet fever should be at once entirely isolated from the other members of the family, and other children in the family should be kept on the premises until the attending physician becomes satisfied that the disease is not scarlet fever. The health officer should at once be notified so that proper quarantine may be effective in suppressing the spread of the disease.

MEASLES AND WHOOPING COUGH. A brief abstract of the paper read by Dr. G. B. Hubbard of Jericho on measles and whooping cough follows:

The ability to diagnose and detect whooping cough and measles is not confined wholly to the medical profession, as the intelligent layman is often able to recognize their presence. With these two diseases there is no remedy that may be called specific. The physician does not attempt to cure, he can only treat symptoms and watch the self-limited disease as it runs its course. The bottom fact to be considered by the profession and society in general is what is the best method of preventing epidemics of these highly contagious diseases. Every physician understands the value of a serious strain of his fellows in their wakes. The public must be made to understand through paper, pamphlet, pulpit and schoolroom what the physician knows; that is, that measles and whooping cough in their completed work are more deadly than smallpox and all more graves than diphtheria. Disabuse the public mind of the idea that it is necessary for every child to have these two diseases. The quarantine and restriction of these diseases should be understood by the public and above all, there be a system organized and enforced which will inform the health officers of the presence of these diseases at the earliest possible moment. Their control lies along the line of popular education and the spread of information as well as with the conscientious work of health officers.

MUMPS AND CHICKENPOX. Dr. F. E. Steele, Jr., of Waterbury read a paper on the diagnosis and control of mumps and chickenpox. A brief abstract follows:

Diagnosis of mumps is quite simple, even in the absence of an epidemic. The characteristic swelling, appearing on both sides of the face, with pain, which is increased by acids, such as vinegar or pickles, placed in the mouth. Mumps are characterized by the rapidity with which the swelling occurs and by its relatively short duration. Reasons for control of mumps are, above all, the fact that in some cases seem so trivial, deafness and kidney inflammation follow. Mumps are contagious from the individual so affected from the beginning of the symptoms. They should be early recognized and isolated.

The diagnosis of chickenpox presents some difficulties, especially during the existence of a mild type of smallpox. Usually it is a trivial affair, but the rare complication of erythema multiforme is a case about which there is much doubt and is isolated and isolated and this is also a good time to urge vaccination. Education of the public is a necessary, and modified quarantine should control mumps and chickenpox.

A discussion followed during which Dr. H. L. Packer of Danville, Dr. Joseph C. Brethling of Lunenburg and Dr. C. S. Leach of Hyde Park took part.

SUPERVISION OF MILK. The subject of "The Supervision of Milk and Its Control" was treated by J. A. Gambrell, milk specialist of the bureau of the dairy industry at Washington, D. C. He said in part:

The work of securing better milk for a city is second to none in importance, milk now occupying an important place in the diet of the people of the United States. The same is true of the city to provide pure, fire place upon the city, exists with regard to pure milk. The speaker then went into detail as to conditions which exist on the farm and those things which determine quality in milk. To obtain results, milk supervisors should not only be able to suggest means to overcome defects but also of which requires an abundance of tact.

The afternoon session was opened with a paper of particular interest by Dr. Archibald McNeil of New York, who took for his subject, "Venereal Diseases as a Public Health Problem." He said in part:

The attempt to place venereal diseases under the same supervision and control as other infectious diseases is one of the most difficult problems that confronts the public health officials today. While the social and moral aspects of

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SHADE NECESSARY FOR HEALTH OF THE POULTRY IN SUMMER

Heat Prostrations Frequently Due to Lack of Protection from Sun; Artificial Shelter Easily Provided.

Range in Corn Field Gives Ideal Conditions for Young Stock; Trees and Shrubs Desirable.

BY MICHAEL K. BOYER, Poultry Editor of The Farm Journal.

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To grow rapidly and develop into profitable early layers, pullets must be provided with shade during the summer months. Mature birds, moreover, will not do their best if they are exposed to the heat. In this article Mr. Boyer tells how to provide shade for poultry.

It is just as important to keep the poultry comfortable in summer as it is in winter. "Comfort" should be the motto of every poultry keeper, and it should be strictly enforced. To remain healthy and vigorous, both fowls and chicks must be protected from the burning rays of the sun.

To deprive the stock of sunlight would be fatal. A house situated where it does not get the sunlight is unfit for fowls; but if it gets the sun for only a few hours a day it may be used. Mature birds soon degenerate away from the sun, and chicks are sickly when grown with little sunlight. But no fowl can thrive when long exposed to the heat of the sun, so there should be shade at least in the heat of the day. Dense and complete shade is to be avoided. Air and sunshine in moderation are important factors in the growth and thrift of stock.

Natural shade is desirable, and fruit trees are particularly good, since they give shelter as well as crops that can be sold at a profit. They provide shade during hot weather, and dropping their leaves for winter, allow the sunshine to strike past their limbs in cool weather. Evergreen trees planted in hedges for windbreaks for winter also furnish shade and cooling shade in summer.

HOW TO PROVIDE ARTIFICIAL SHADE.

Shade can be furnished artificially in different sections of the yard by using branches of trees cut in full foliage, or by driving three foot stakes in the ground and covering them with a canopy of burlap, or by erecting frames made of wire netting or lath, covered with hay or straw.

The prime importance of sunlight in sanitation is universally acknowledged by the medical fraternity. It is nature's great disinfectant, and the direct rays of the sun will destroy disease germs.

So the beneficial effects of sunlight must not be ignored.

The question is how can it be controlled so as not to do damage to the stock.

It is not uncommon to have heat prostrations during hot weather, especially in the case of heavy fowls, the birds suddenly dropping over insensible. The cause is attributed to the heat working a pressure on the brain. Exposure to the hot sun is frequently the reason.

I might go through the entire list of poultry ailments and find where sunshine acts as a tonic as well as a preventive of diseases. The lesson is, then, that we have our poultry houses so erected that the sunshine can enter at certain hours and in the active stages of the disease, and destroy disease germs.

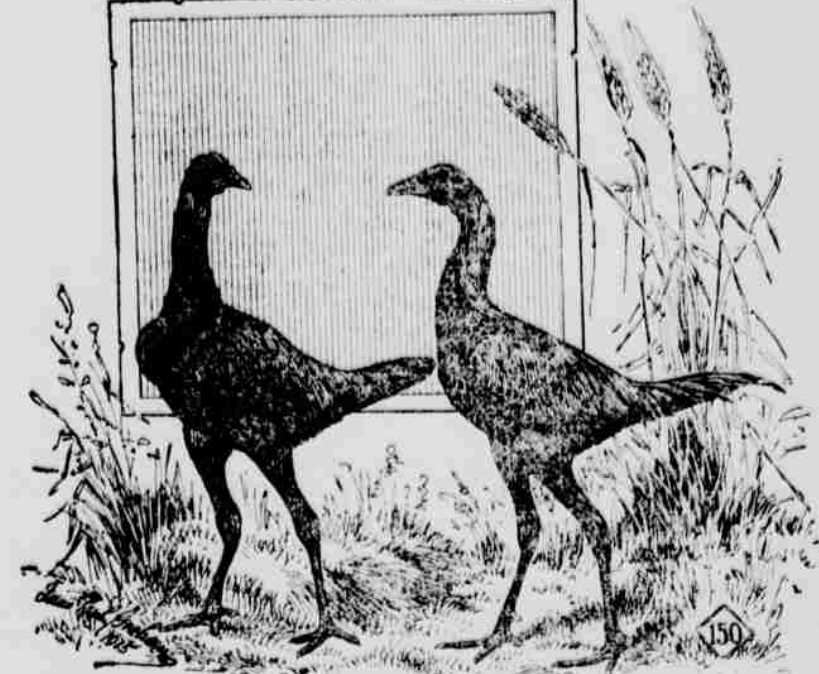
The problem does not fall within the province of the public health official, the various phases of the question are so closely interwoven that from whatever standpoint the matter is approached all sides of the question demand consideration. The church and the moralists have had little or no effect on the solution of the problem, as the religious and moral aspects of the question, while theoretically accepted by a majority of the people, have been to a great extent ignored in practice. Hope of the ultimate solution of the problem seems to be entirely along broad educational lines.

Dr. Bryce then went into the details of the venereal diseases, which are most common in public health work, namely syphilis and gonorrhea, both very infectious diseases. While it is true that this disease is usually transmitted by direct contact, infection not infrequently results from pipes, drinking glasses, spoons, forks, etc., and from towels and toilet articles, which have been used by persons in the active stages of the disease, also by the habit of promiscuous kissing. He then went into the effects the disease has upon the human system and of the operation, especially upon women, during their early married life.

The clearing up of the problem is entirely one of educating the masses to a true understanding of this scourge that menaces their well being.

VENEREAL DISEASES.

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Brown Red Game Bantams.

Bantams are always fascinating to those who become acquainted with them, and many men of affairs have made a hobby of breeding bantams for exhibition. Skill and patience are required to reach perfection in this diverting avocation.

Game Bantams were originated in England about a century ago; have been constantly improved until today they are accredited with possessing better color and more typical shape than their larger brothers and sisters.

The Black Reds are the most popular and most widely bred, while the Red Poles, Buckskins, Hircines, and Brown Reds enjoy about equal popularity. The latter are best described as black, marked with laces of brown yellow. The female is almost all black with brown lacing on the back and a little on the edge of the feathers under the throat. The male has each feather of the breast

laced with brown yellow and the neck those who become acquainted with them. No one must think of these bantams as being a mere curiosity, for they are a most valuable asset to the poultry raiser.

Game Bantams may be successfully reared in a small house, small runs, or on a small farm. They are small eggs, but the returns are large on the investment. Many specimens sold for \$5 to \$10 each, and great satisfaction may be had in winning in the show and selling the surplus fowls and eggs for hatchlings.

The next best substitute would be the planting of shrubs in partial shade. No one must think of these bantams as being a mere curiosity, for they are a most valuable asset to the poultry raiser.

Probably at no time is the hot sun more dangerous to fowls than during molting season. Molting is nature's condition for exchanging the old, worn-out, feathered suit for a fresh clean one. Quite frequently individual birds will be almost entirely nude, and when exposed to the hot sun the skin not only shrivels, but is apt to blister and become sore. It is just as important to shelter molting fowls from hot sun as it is to protect them from cold storms.

Growing chicks will not thrive if they are not given the proper amount of shade in their runs. They must be protected from the sun by the use of shade, and in the summer months, when the sun is at its height, it is best to have a large grass plot with plenty of trees and bushes for shade. I was told that this farm did most of its hatching in summer for the reason that the stock needed less care and grew under more natural conditions.

In Rhode Island and Connecticut they would not raise a single fourth of the crop of the turkeys that they do raise if it were not for the shaded rolling country over which the birds roam.

The duck farms of Long Island would have to go out of business if it were not that their broader yards are partially shaded, as too much exposure to the hot sun is fatal to young ducks.

Some of the best of New England would fail if they exposed their fowls to the hot sun.

In the bulletin for June of your State board of health I find an outline of the program of what may be briefly called health week in Vermont and I think without exaggeration it may be said to be the finest example of the development of public health work of any State or province on the continent. Nowhere have I known of such complete methods being adopted for educating not alone the health officers but also the profession and public on public health work. It is a compliment to your State government and to the people of Vermont.

The problems which health officers have to deal with relate especially to the protection against outbreaks of disease. Our problems are essentially those associated with the aggregation of a number of human units on the same location during the summer months and have to do with similar aggregations elsewhere, whether in army camps in Belgium or the Dardanelles. They resolve themselves into three classes, supervision of food and drink, disposal of excreta and control of communicable disease. Dr. Bryce went into detail in telling of these three classes and of the heavy penalties resulting from not paying strict attention to them. In solving the problems the whole question becomes one of enforcing regulations. Dr. Bryce went into detail as to the manner the house and its rooms and surroundings should be cared for in an effort for sanitation.

During the evening the following resolution, introduced by M. J. Hanzard of Peru, was adopted: "Resolved, That we take deep pride in having as one of our members one of the six surviving sons of soldiers of the Revolution. Dr. C. A. Perry of Bradshaw."

THEY WILEY EVERY DAY. Every day Wiley & Co. receive letters from grateful men and women, telling how Wiley Kidney Pills cured them of backache, sore muscles, stiff joints and other kidney and bladder troubles. It is very quick to relieve lumbago and rheumatism due to kidney trouble. No other remedy has a longer record of cures. J. W. O'Sullivan. (Adv.)

FOLLOWING THE RULE. Grunts—What makes that child howl so? Stunts—Not at all. His parents are imbued with modern ideas of child culture and encourage him to make that noise of